



# SmartPA Criteria Proposal

Drug/Drug Class:	Neuropathic Pain Agents PDL Edit			
First Implementation Date:	May 29, 2013			
Revised Date:	April 7, 2022			
Prepared For:	MO HealthNet			
Prepared By:	MO HealthNet/Conduent			
Criteria Status:	□Existing Criteria ⊠Revision of Existing Criteria □New Criteria			

#### **Executive Summary**

Purpose: The MO HealthNet Pharmacy Program will implement a state-specific preferred drug list.

Why Issue Selected: Neuropathic pain results from damage or disease affecting the somatosensory system. It may be associated with abnormal sensations and pain produced by normally nonpainful stimuli. Neuropathic pain may have continuous and/or episodic components. Common symptoms include burning or coldness, pins and needles sensations, numbness, and itching. This type of pain may result from disorders of the peripheral nervous system or the central nervous system and may be divided into peripheral or central neuropathic pain, or mixed (which includes both).

Total program savings for the PDL classes will be regularly reviewed.

#### **Program-Specific** Information:

Preferred Agents	Non-Preferred Agents		
Gabapentin Caps/Tabs	Gabapentin Soln		
<ul> <li>Lidocaine 5% Patch</li> </ul>	Gralise®		
Lidoderm <sup>®</sup> 5% Patch	Horizant®		
	Neurontin®		
	Qutenza®		
	Ztlido®		

Type of Criteria: 

Increased risk of ADE **☒** Preferred Drug List

**☒** Appropriate Indications ☐ Clinical Edit

Data Sources: 

Only Administrative Databases □ Databases + Prescriber-Supplied

## **Setting & Population**

- Drug class for review: Neuropathic Pain Agents
- Age range: All appropriate MO HealthNet participants

#### Approval Criteria

Failure to achieve desired therapeutic outcomes with a trial on 2 or more preferred agents

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- Documented trial period for preferred agents OR
- Documented ADE/ADR to preferred agents
- For gabapentin solution: participant aged ≤ 10 years
- For Horizant: available for diagnosis of restless legs syndrome
  - o After therapeutic trial on ropinirole or pramipexole (trial defined as 30/180 days) OR
  - Documented ADE/ADR to ropinirole or pramipexole
- For Gralise: documented allergy to ≥ 3 immediate-release gabapentin products

### **Denial Criteria**

- Lack of adequate trial on preferred agents
- For gabapentin: participant has documented history of pregabalin therapy in the past 30 days
- Therapy will be denied if all approval criteria are not met
- For gabapentin: cumulative daily doses > 3,600 mg
- Denial criteria contained within the High Risk Therapies Clinical Edit: Claim is for gabapentin and:
  - Participant has history of > 7 days of opioid therapy (excluding buprenorphine tablets and buprenorphine/naloxone combinations) in the past 60 days AND
  - Participant lacks history of at least 1 claim for an opioid emergency reversal agent in the past 2 years

Claim exceeds maximum dosing limitations for the following:

Drug Description	Generic Equivalent	Max Units per Day
GABAPENTIN 250 MG/CUP SOLUTION	GABAPENTIN	60 mL
GABAPENTIN 300 MG/6ML SOLUTION	GABAPENTIN	60 mL
GRALISE ER 300 MG TABLET	GABAPENTIN	10 tablets
GRALISE ER 600 MG TABLET	GABAPENTIN	5 tablets
HORIZANT ER 300 MG TABLET	GABAPENTIN ENACARBIL	10 tablets
HORIZANT ER 600 MG TABLET	GABAPENTIN ENACARBIL	5 tablets
LIDODERM 5% PATCH	LIDOCAINE	3 patches
NEURONTIN 100 MG CAPSULE	GABAPENTIN	30 capsules
NEURONTIN 250 MG/5 ML SOLN	GABAPENTIN	60 mL
NEURONTIN 300 MG CAPSULE	GABAPENTIN	10 capsules
NEURONTIN 400 MG CAPSULE	GABAPENTIN	8 capsules
NEURONTIN 600 MG TABLET	GABAPENTIN	5 tablets
NEURONTIN 800 MG TABLET	GABAPENTIN	4 tablets
QUTENZA 8% KIT	CAPSAICIN/SKIN CLEANSER	4 patches
ZTLIDO 1.8% TOPICAL SYSTEM	LIDOCAINE	3 patches

Required Documentation						
Laboratory Results: MedWatch Form:		Progress Notes: Other:				
Disposition of Edit						
Denial: Exception Code "0160" (Preferred Drug List) Rule Type: PDL						

# **Default Approval Period**

1 year

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#### References

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- Ohio Administrative Code, 4729 State Board of Pharmacy; Chapter 4729-37 Drug Database. Rule 4729-37-12: Dangerous Drug Monitoring. Rule effective December 2016. Ohio website accessed December 2017.
- USPDI, Micromedex; 2021.
- Drug Facts and Comparisons On-line; 2021.